



## AMERICAN PATHWAYS 2000 -- Round 2 APPLICATION FORM

**Application Deadline: November 8, 1999 (postmarked)**

--Submit only one itinerary per application--

A. NOMINATION FOR:

1. Itinerary Name: \_\_\_\_\_

2. Destination(s) by city/community and state: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Length of Itinerary (# of days): \_\_\_\_\_

B. CERTIFICATION: This itinerary is new (not previously sold) and was developed specifically for Round 2.

C. THEMES -- *Check each category for which you wish to be considered. An itinerary may be made up of any combination of these categories. (See description on Pages 5-6 of the Introduction to American Pathways 2000.)*

D. ITINERARY DESCRIPTION -- *Explain each day with a description of morning, afternoon, and evening activities for each day. Underline, italicize, or bold each activity which interprets theme(s). (If more space is needed, attach this information in typewritten form on plain white bond at the end of the application. Please label your additional page(s) as "D. Itinerary Description.")*

Day 1 morning \_\_\_\_\_

\_\_\_\_\_

afternoon \_\_\_\_\_

evening

Day 2 morning

afternoon

evening

Day 3 morning

afternoon

evening

Day 4 morning

afternoon

evening

(Attach additional pages for additional days. Label as "D. Itinerary Description.")

- THEME(S) INTERPRETATION -- *Explain fully how the **American Pathways 2000** themes will be interpreted by your itinerary for your customers, including examples of what activities in the itinerary interpret the theme(s).* (If more space is needed, attach this information in typewritten form on plain white bond at the end of the application. Please label your additional pages as "E. Theme(s) Interpretation.") Example of interpretation by an itinerary of the theme "From Sea to Shining Sea": The **Canyons in Arizona** highlight southwest Hopi and Navajo Indian culture, past and present, in the splendid natural environment where they made their home and the Spanish superimposed theirs. Visits to an **active Navajo trading center, Canyon de Chelly National Monument**, and other sites are included. While there, tour manager and local guides give insight to the

history and culture of the Native Americans, Spanish, and other European immigrant pioneers who made this sometimes harsh, but always beautiful, land their home.

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F. AVAILABILITY

Please give the dates your itinerary will be available.

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If the itinerary is linked to an event or limited to a season, please explain its availability or time limitations. Example: The itinerary revolves around a festival held once-a-year.

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G. MARKETING PLAN -- *Attach at least one of the following plans. Check which is/are attached. **Attach Marketing Plan(s) at end of application after any other attachments.***

Domestic Marketing Plan: Check that a completed Domestic Marketing Plan is attached.

International Marketing Plan: Check that a completed International Marketing Plan is attached.

H. ELIGIBILITY CERTIFICATION OF OPERATOR – Self-certification

I certify that \_\_\_\_\_  
(Name of Applicant Operator)

OR

(See Introduction pages 2-3, for list of proof needed.)

CEO, managing partner, or sole proprietor:

_____	_____
<i>Print Name</i>	<i>Signature</i>
Name of Applicant Operator _____	Date _____
Phone ( ) _____	Fax ( ) _____
E-mail _____	

I. RECOMMENDATION AND CERTIFICATION by Destination Marketing Organization (DMO). (The DMO is a CVB, state tourism office, or other similar organization.)

I certify that \_\_\_\_\_

*Name of DMO*

recommends that \_\_\_\_\_

*Name of Itinerary*

be designated, and further certify that the itinerary was developed for American Pathways 2000, Round Two, and not previously sold.

DMO CEO

\_\_\_\_\_

*Print Name*

*Signature*

Address \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

E-mail \_\_\_\_\_

J. APPLICANT OPERATOR CONTACT INFORMATION

Name \_\_\_\_\_

Title \_\_\_\_\_

Organization \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

E-mail \_\_\_\_\_

K. RESPONSIBILITIES, IF DESIGNATED -- *If designated, we understand we will be responsible for providing the following:*

1. Signed agreement on the use of the official American Pathways 2000 logo.
2. Performance Measures which include the number of current sales of this itinerary, the number of sales between March 2000 and December 2000, and the number of inquiries about the itinerary. Information furnished is to track the volume of sales, not revenue.
3. Visual aids/descriptions to be used for publicity purposes.

4. Copies of any brochures or other materials developed using the official logo. (The official logo can only be used on designated itineraries.)

\_\_\_\_\_  
Signature of CEO/Managing Partner/Sole Proprietor

\_\_\_\_\_  
Date

Mail to Tourism Industries, U.S. Department of Commerce, Room 2073, Washington, D.C. 20230, Attn: Linda Harbaugh.

**PLEASE NOTE:** Be sure to fill in your application completely and clearly.  
**INCOMPLETE AND ILLEGIBLE APPLICATIONS WILL NOT BE ELIGIBLE FOR CONSIDERATION.**